

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		8-2-01
I.P.E. CLASSIFIER		902	08/30/01
FORMALITY REVIEW	DL		
RESPONSE FORMALITY REVIEW			

09/915,027

# INDEX OF CLAIMS

Rejected N  
 Allowed I  
 (Through numeral) Canceled A  
 Restricted O

Non-acted  
 Interference  
 Appeal  
 Objected

Claim	Date	Claim	Date	Claim	Date
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
6		6		6	
7		7		7	
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37		37		37	
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43		43		43	
44		44		44	
45		45		45	
46		46		46	
47		47		47	
48		48		48	
49		49		49	
50		50		50	

If more than 150 claims or 10 actions  
staple additional sheet here

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